

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AS	10891	3/16/02
O.I.P. E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Accepted	N	Not objected
=	Amended	I	Interim
—	Carried	A	Amended
:	Restricted	O	Objected

Claim	Date	Claim	Date	Claim	Date
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